

City of Rockville Boards and Commissions Expression of Interest (EOI) Application

If you need this form in another format, please contact our ADA (Americans with Disabilities) Coordinator at 240-314-8108, email jkelly@rockvillemd.gov, TTY-240-314-8137 or Relay 711. The City welcomes requests for reasonable modifications for persons with disabilities who wish to serve on or attend Boards, Commissions or Task Force meetings.

Date:			
Interest (One EOI per Board or Commissi	ion Interest):		
Name :			
Address:	Apt.#		
		Zip:	
Home Phone: ()	Email:_		
Work Phone (For staff use only): ()_	C	ell Phone: (_)
Summary of Work Experience:			
Additional Experience:			
Education/Training:			
Volunteer Activities:			
Professional Affiliations/Memberships:			
Please describe your interest in serving	g on this Board/Commis	sion:	
Please attach an updated resume or additional in	formation (Optional).		
Please indicate [] yes or [] no whether or not other information that you provide to the public. Y whether or not the City may give elected officials information will not be used for any fundraising or	our address and phone number who serve Rockville (other that	er(s) will not be in an the Mayor and	ncluded. Please indicate [] yes or [] no discouncil) your name and address. This
By submitting this Expression of Interest form and information to the Mayor and Council, to the Boar			
			Signature
Please return completed and signed form to:	CityClerk@rockvillemd.gov	or mail to:	City of Rockville Mayor and Council City Clerk/Director of Council Operations 111 Maryland Avenue Rockville, MD 20850

Updated: 02/23/2017